

Your first name and initial

1

Last name

Your social security number

If a joint return, spouse's first name and initial

1

Last name

Spouse's social security number

Present home address - number and street, rural route

Apt. No.

Daytime telephone

2

()

é **IMPORTANT!** é
You must enter
your SSN(s) above.

City, town or post office

State

ZIP code

Home telephone 94

For DOR use only

3

()

Filing Status

Exemptions

If itemizing be sure you attach your federal Sch. A and Arizona Sch. A if required.

Attach W-2 here. Attach payment on top.

4

Married filing joint return

5

Head of household - name of qualifying dependent :

6

Married filing separate return. Enter spouse's social security number above
and full name here. ➤

88

7

Single

81

8

Age 65 or over (you and/or spouse)

9

Blind (you and/or spouse)

10

Dependents. From page 2, line A2 - do not include self or spouse.

Enter the number
claimed. Do not put
a check mark.

82

4 month federal extension 82 D

11

Qualifying parents and ancestors. From page 2, line A5.

CHECK ONE if filing
under a federal extension:

6 month federal extension 82 F

12

Federal adjusted gross income (from your federal return)

12

00

13

Additions to income (from page 2, line B12)

13

00

14

Add lines 12 and 13

14

00

15

Elective subtraction of 1999 federal retirement contributions. See instructions

15

00

16

Subtractions from income (from page 2, line C28)

16

00

17

Total subtractions. Add line 15 and line 16

17

00

18

Arizona adjusted gross income. Subtract line 17 from line 14

18

00

19

Deductions Check box and enter amount. See instructions, page 12. 19 I ☐ ITEMIZED 19 S ☐ STANDARD

19

00

20

Personal exemptions. See page 12 of the instructions

20

00

21

Arizona taxable income. Subtract lines 19 and 20 from line 18

21

00

22

Compute the tax using amount on line 21 and Tax Rate Table X, Y or Optional Tax Rate Tables

22

00

23

Tax from recapture of credits from Arizona Form 301, line 28

23

00

24

Subtotal of tax. Add lines 22 and 23

24

00

25

Clean Elections Fund Tax Reduction. See instructions, page 13. 25 1 ☐ YOURSELF 25 2 ☐ SPOUSE

25

00

26

Tax reduction. Complete worksheet on page 14 of the instructions

26

00

27

Reduced tax. Subtract line 26 from line 24

27

00

28

Family income tax credit from worksheet on page 14 of instructions

28

00

29

Credits from Arizona Form 301, line 53

29

00

30

Credit type. Enter form number of each credit claimed

30

3

3

3

3

3

30

00

31

Subtract lines 28 and 29 from line 27. If lines 28 and 29 are more than line 27, enter zero.

31

00

32

Clean Elections Fund Tax Credit. From worksheet on page 16

32

00

33

Balance of tax. Subtract line 32 from line 31. If line 32 is more than line 31, enter zero.

33

00

34

Arizona income tax withheld during 1999

34

00

35

Arizona estimated tax payments for 1999

35

00

36

Amount paid with 1999 Arizona extension request (Form 204)

36

00

37

Property tax credit. Attach Arizona Form 140PTC and enter amount claimed

37

00

38

Total payments/credits. Add lines 34 through 37

38

00

39

TAX DUE. If line 33 is larger than line 38, enter amount of tax due. Skip lines 40, 41 and 42

39

00

40

OVERPAYMENT. If line 38 is larger than line 33, enter amount of overpayment

40

00

41

Amount of line 40 to be applied to 2000 estimated tax

41

00

42

Balance of overpayment. Subtract line 41 from line 40

42

00

43

Voluntary gifts to:

44

Aid to Education Fund (Enter entire refund only) 00

45

Citizens Clean Elections Fund 00

46

Arizona Wildlife Fund 00

47

Child Abuse Prevention Fund 00

48

Domestic Violence Shelter Fund 00

49

Neighbors Helping Neighbors Fund 00

50

Special Olympics Fund 00

Political Gift

44

00

45

00

46

00

47

00

48

00

49

00

51 Check only one if making a political gift: 51 1 ☐ Democratic 51 2 ☐ Libertarian 51 3 ☐ Reform 51 4 ☐ Republican

52

Estimated payment penalty and interest

52

00

53

Check applicable box(es). 53 1 ☐ Annualized/Other 53 2 ☐ Farmer or fisherman 53 3 ☐ Form 221 attached

54

MSA withdrawal penalty

54

00

55

Total of lines 43, 44, 45, 46, 47, 48, 49, 50, 52, and 54

55

00

56

REFUND. Subtract line 55 from line 42. If less than zero, enter amount owed on line 57

56

00

57

AMOUNT OWED. Add lines 39 and 55. Include SSN on payment

Make Checks Payable To: Arizona Department of Revenue

57

00

PART A
DependentsDo not list
yourself or
spouse.

A1	List children and other dependents. If more space is needed, attach a separate sheet.				
	First name	Last name	Social security number		Relationship
					No. of months lived in your home in 1999
A2	Enter total number of persons listed in A1 here and on the front of this form, box 10.				TOTAL
A3	Enter the names of the dependents age 65 or over listed above who do not qualify as your dependent on your federal return:				
A4	List qualifying parents and ancestors. If more space is needed, attach a separate sheet. You cannot list the same person here and also on line A1. For information on who is a qualifying parent or ancestor, see page 5 of the instructions.				
	First name	Last name	Social security number		Relationship
					No. of months lived in your home in 1999
A5	Enter total number of persons listed in A4 here and on the front of this form, box 11.				TOTAL
					A5

PART B
Additions to Income

B6	Non-Arizona municipal interest	B6		00
B7	Early withdrawal of Arizona Retirement System contributions not included on your federal return	B7		00
B8	Ordinary income portion of lump-sum distributions excluded on your federal return	B8		00
B9	Agricultural water conservation expenses	B9		00
B10	Medical savings account (MSA) distributions. <i>See page 6 of the instructions</i>	B10		00
B11	Other additions to income. <i>See instructions and attach your own schedule</i>	B11		00
B12	Total. <i>Add lines B6 through B11. Enter here and on the front of this form, line 13</i>	B12		00

PART C
Subtractions from Income

C13	Exemption: Age 65 or over. <i>Multiply the number in box 8, page 1, by \$2,100</i>	C13		00
C14	Exemption: Blind. <i>Multiply the number in box 9, page 1, by \$1,500</i>	C14		00
C15	Exemption: Dependents. <i>Multiply the number in box 10, page 1, by \$2,300</i>	C15		00
C16	Exemption: Qualifying parents and ancestors. <i>Multiply the number in box 11, page 1, by \$10,000</i>	C16		00
C17	Total exemptions. <i>Add lines C13 through C16. If you have no other subtractions from income, skip lines C18 through C28 and enter the amount on line C17 onto Form 140, page 1, line 16</i>	C17		00
C18	Interest on U.S. obligations such as U.S. savings bonds and treasury bills	C18		00
C19	Exclusion for federal, Arizona state or local government pensions (up to \$2,500 per taxpayer)	C19		00
C20	Arizona state lottery winnings included as income on your federal return (up to \$5,000 only)	C20		00
C21	U.S. social security or Railroad Retirement Act benefits included as income on your federal return	C21		00
C22	Agricultural crops contributed to Arizona charitable organizations	C22		00
C23	Alternative fuel vehicles and refueling equipment	C23		00
C24	Certain wages of Native Americans	C24		00
C25	Income tax refund from other states. <i>See instructions</i>	C25		00
C26	Deposits and employer contributions into MSAs. <i>See page 10 of the instructions</i>	C26		00
C27	Other subtractions from income. <i>See instructions and attach your own schedule</i>	C27		00
C28	Total. <i>Add lines C17 through C27. Enter here and on the front of this form, line 16</i>	C28		00

PART D**D29** Last name(s) used in prior years if different from name(s) used in current year.**Please Sign Here**

I have read this return and any attachments with it. Under penalties of perjury, I declare that to the best of my knowledge and belief, they are true, correct and complete.			
Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.			
Your signature		Date	Occupation
Spouse's signature		Date	Spouse's occupation

Paid Preparer's Information

Preparer's signature		Firm's name (preparer's if self-employed)	
Preparer's TIN	Date	Preparer's address	

If you are sending a payment with this return, mail to: Arizona Department of Revenue, PO Box 52016, Phoenix AZ 85072-2016.

If you are expecting a refund, or owe no tax, or owe tax but are not sending a payment, mail to: Arizona Department of Revenue, PO Box 52138, Phoenix AZ 85072-2138.